

28th CIF Conference 3rd-8th August 2009  
Kiljava, Finland

## ABSTRACTS FOR WORKSHOPS

### C. Elderly Care and Palliative Care

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### **How to involve elderly people in different activities and to care for them - the Tanzania Experience**

1. Introduction - Definitions of elders & the definition in Tanzania.
2. The population of elders.
3. The National Policy of ageing is in place & being practised.
4. Elders: Physical changes & to work with them patiently. Have back grounds, customs, attitudes & beliefs.  
Social issues, elders are in social groups, campaigns & symposium engagement
5. They want to be independent & are different from children.
6. There are 122 tribes in Tanzania, all use one national language, when they learn (Kiwahili). They learn for immediate needs & have own interests. Corrections of mistakes to them must be tactful hence adult psychology has to be applicable, patience is highly needed.
7. Care of elders: They need good health, food & housing. Are involved in planning & decision making at different levels in rural & urban areas as they are valued as OLD IS GOLD.
8. Poverty Reduction. Elders are in different activities to reduce poverty depending on age and physique, in Economic, Micro Financing & Entrepreneurship.
9. Challenges faced: Some are abused of witchcraft due to red eyes because some of them use cow dung for energy consumption. Some are main providers & care for orphans whose parents & relatives have died because of HIV/AIDS.
10. Monthly meeting takes place with Mr President, His Excellency, for: Discussions of different subjects; Exchange views; Some advices are aired by their voices.
11. Have own national day celebrations & media coverage takes place in different activities. Conclusion: OLD IS GOLD, they are also known as old people ARE MEDICINE.

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## **How is a social worker's agency visible in meeting with an elderly client in a rehabilitation context? An ethnographic case study from a rehabilitation centre**

My research, which I produced for Helsinki University, focuses on the agency of a social worker in the context of gerontological social work and rehabilitation.

A case study was performed with one social worker in a rehabilitation centre in southern Finland. I aimed to describe the core work of the social worker, the single interview situations on two day-rehabilitation courses aimed for elderly people. As research methods I used observation and interviewing.

Being a social worker in a rehabilitation centre, the sole representative of a profession amongst strong medical professions and without the rights of a civil servant, is demanding. It puts special requirements on the agency and the space of action that he/she has.

As the core of the social work in this rehabilitation centre the following emerged: creating good interaction between the participants of a rehabilitation course and the social worker, mapping out the life conditions, mapping out the social functional ability and need for help, finding out about the economical situation, finding out the expectations and hopes of the elderly rehabilitation-participant towards the rehabilitation period, and multi-professional teamwork with the rehabilitation team. When implementing these tasks, the social worker's agency is visible, for example, in different interviewing styles: narrative interview, mapping interview, interview based on a form. The social worker could even during one interview use all these different styles of interviewing.

To look at a social worker's agency in the context of her/his work can be a way to promote critical reflexion and development of social work.

Keywords: gerontological social work, rehabilitation, agency

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## **Dialogue with Palliative Patients**

Palliative care is an approach in which it improves the quality of life of the patients and their families facing the problems associated with life threatening disease cancer

through the prevention and relief of suffering by means of early problem identification and impeccable assessment and treatment of pain and other problems physical, psychological, spiritual and other mode of treatment.

### **'The Psychological Approaches of Breaking Bad News in Palliative counseling for Terminally Ill patients'.**

Even the best of treatment and whole hearted efforts of a team of dedicated doctors sometimes fails to cure a terminally ill patient and the medical fraternity is forced to say that further intervention is not possible. Such patients undergo palliative counseling as they are in advanced stage. Many patients with advanced cancer will eventually die of their disease. I work as a medical social worker and counselor with "Cancer Patients Aid Association" Mumbai, India for last eleven years. I attend the patients at our centre, different hospitals, at their home, where majority of patients come from rural background and was educationally & socio-economically backward. In general I attend 250 – 300 patients / relatives every month for different types of support. Among all patients every day I meet 2 - 3 palliative cancer patients and their relatives.

The aim of the counseling is to provide care when there is no cure. The efforts are always towards giving comforts and emotional support to the patients and to his family members. Their needs are physical, psychological, social and spiritual. It varies from individual to individual. In this stage patient feels discomfort (mental & physical), fear, anger, mental isolation, sadness etc. which trouble the patients in addition to his physical sickness. Death is always co-related with the fear, it is a natural & inevitable. But it is very difficult to accept and digest the fact. Not only the patient, but his relatives also experience difficulty in facing such situation. The patient loses his self- esteem and feels vulnerable. This feeling makes the patient more weak. Each one has his own coping capacity and level of acceptance. This doesn't depend upon the age, sex, and economical status of the patient. In this period the care for seriously ill children and their families are the central to pediatrics. The death of a child has long been acknowledged as one of the greatest tragedies for the family.

The psychological approaches are an integral part of the care of the cancer patients in advanced stages. The patient and their relatives with cancer are calling for social worker's intervention to the promotion of quality of life for the patients and rehabilitation for their family.